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Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: INTRALUMINAL DEVICE, COATING
FOR SUCH DEVICE, AND METHOD FOR
PREPARING SAID DEVICE
Attorney Docket Number:: 2005-1001
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: WILLEM
Middle Name:: JOHAN
Family Name:: VAN DER GIESSEN
City of Residence:: ROTTERDAM
State or Province of Residence::
Country of Residence:: NETHERLANDS
Street of Mailing DR. MOLENWATERPLEIN 40
Address::
City of Mailing Address:: ROTTERDAM
State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-3015 GD

Applicant Authority Type:: Inventor
Primary Citizenship Country:: NETHERLANDS
Status:: Full Capacity
Given Name:: HELENA
Middle Name:: M M
Family Name:: VAN BEUSEKOM
City of Residence:: ROTTERDAM
State or Province of Residence::
Country of Residence:: NETHERLANDS
Street of Mailing P.O. BOX 1738
Address::
City of Mailing Address:: ROTTERDAM
State or Province of Mailing Address::
Country of Mailing Address:: NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-3000 RD

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number:: 000466

Domestic Priority Information

Application::	Priority Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP00/09658	10/2/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Europe	99203203.7	3/31/99	Yes

Assignment Information

Assigned Name:: ORBUS MEDICAL TECHNOLOGIES INC.

Street of Mailing Address:: 3103 NW 35th Avenue

City of Mailing Address:: FORT LAUDERDALE

State or Province of Mailing Address:: FL

Country of Mailing Address:: UNITED STATES

Postal or Zip Code of Mailing Address:: 33309